

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

PACPLUS

ADDRESS (number and street)

268 Bush Street Unit4409

☐ Check if different
than previously
reported. (ACC)

San Francisco

CA

94104

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00516500

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☒ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
04 01 2012

through

M M M / D D D / Y Y Y Y Y Y
06 30 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Lisa Le

Signature of Treasurer

Lisa Le

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
07 14 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PACPLUS

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 04 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y 06 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	6209.72	
(c) Total Receipts (from Line 19)	124184.30	130634.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	130394.02	130634.30
7. Total Disbursements (from Line 31)	98338.87	98579.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	32055.15	32055.15
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PACPLUS

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2012

To:

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2012

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

117548.30

123318.30

(ii) Unitemized

6636.00

7316.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

124184.30

130634.30

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

124184.30

130634.30

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

124184.30

130634.30

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

124184.30

130634.30

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	56138.87	56379.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	56138.87	56379.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6500.00	6500.00
24. Independent Expenditures (use Schedule E)	28700.00	28700.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	7000.00	7000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	98338.87	98579.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	98338.87	98579.15

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	124184.30	130634.30
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	124184.30	130634.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	56138.87	56379.15
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	56138.87	56379.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 29
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Stephanie Anello

Mailing Address 2277 Star Lilly Ct.

City State Zip Code
 Brentwood CA 94513

FEC ID number of contributing
federal political committee.

C

Name of Employer

Antioch Unified School Dist.

Occupation

Associate Superintendent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 04 / 2012

Transaction ID : SA11AI.4209

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

B. Keith Archuleta

Mailing Address 1883 Mt. Conness Way

City State Zip Code
 Antioch CA 94531

FEC ID number of contributing
federal political committee.

C

Name of Employer

Emerald Consulting

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 12 / 2012

Transaction ID : SA11AI.4259

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

C. Keith Archuleta

Mailing Address 1883 Mt. Conness Way

City State Zip Code
 Antioch CA 94531

FEC ID number of contributing
federal political committee.

C

Name of Employer

Emerald Consulting

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 18 / 2012

Transaction ID : SA11AI.4381

Amount of Each Receipt this Period

20.00

non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 29

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Robert Bass

Mailing Address 2277 Star Lilly Ct.

City State Zip Code
 Brentwood CA 94513

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mt. Diablo Unified School Dist

Occupation

Vice Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 04 / 2012

Transaction ID : SA11AI.4213

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

B. Gary Beberman

Mailing Address 697 Douglass St.

City State Zip Code
 San Francisco CA 94114

FEC ID number of contributing
federal political committee.

C

Name of Employer

LFP

Occupation

Jack of all trades

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 27 / 2012

Transaction ID : SA11AI.4664

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

C. Donna Bransford

Mailing Address 3068 Birdsau Ave

City State Zip Code
 Oakland CA 94619

FEC ID number of contributing
federal political committee.

C

Name of Employer

DNB Strategie Consulting

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 01 / 2012

Transaction ID : SA11AI.4476

Amount of Each Receipt this Period

240.00

non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

720.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Cedric Brown

Mailing Address 565 Bellevue Ave #907

City State Zip Code
 Oakland CA 94610

FEC ID number of contributing federal political committee.

C

Name of Employer

Kapor Foundation

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 27 / 2012

Transaction ID : SA11AI.4668

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

B. Helen Cagampang

Mailing Address 1015 Fresno Ave.

City State Zip Code
 Berkeley CA 94707

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 28 / 2012

Transaction ID : SA11AI.4455

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

C. Helen Cagampang

Mailing Address 1015 Fresno Ave.

City State Zip Code
 Berkeley CA 94707

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 01 / 2012

Transaction ID : SA11AI.4478

Amount of Each Receipt this Period

20.00

non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Gregory Cendana

Mailing Address 1810 California NW St., Apt 101

City State Zip Code
 Washington DC 20009

FEC ID number of contributing
federal political committee.

C

Name of Employer

APALA, AFL-CIO

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

05 / 16 / 2012

Transaction ID : SA11AI.4377

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

B. Charic Daniels

Mailing Address 3502 S MacGregor Way

City State Zip Code
 Houston TX 77021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Exxon Mobil Corporation

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 04 / 2012

Transaction ID : SA11AI.4335

Amount of Each Receipt this Period

500.00

non-contribution account

Full Name (Last, First, Middle Initial)

C. Deborah Drysdale

Mailing Address 270 Moncada Way

City State Zip Code
 San Francisco CA 94127

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 06 / 2012

Transaction ID : SA11AI.4521

Amount of Each Receipt this Period

500.00

non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Amy Epstein

Mailing Address 1467 Shotwell St.

City

San Francisco

State

CA

Zip Code

94110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leadership Public Schools

Occupation

Public School Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SA11AI.4468

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

B. Salvatore N Evola

Mailing Address P.O. Box 647

City

Pittsburg

State

CA

Zip Code

94565

FEC ID number of contributing
federal political committee.

C

Name of Employer

City of Pittsburg

Occupation

Council Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2012

Transaction ID : SA11AI.4265

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

C. David Foecke

Mailing Address 3068 Birdsall Ave

City

Oakland

State

CA

Zip Code

94619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2012

Transaction ID : SA11AI.4483

Amount of Each Receipt this Period

240.00

non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

720.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Baryn Futa

Mailing Address 302 Garfield St.

City State Zip Code
 Denver CO 80206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 08 / 2012

Transaction ID : SA11AI.4351

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

B. Kim Geron

Mailing Address 332 Sunset Blvd. #3

City State Zip Code
 Hayward CA 94541

FEC ID number of contributing
federal political committee.

C

Name of Employer

California State University

Occupation

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : SA11AI.4734

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

C. Kristin Hull

Mailing Address 341 El Cerrito Ave.

City State Zip Code
 Piedmont CA 94611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Matcap

Occupation

Educational Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 28 / 2012

Transaction ID : SA11AI.4707

Amount of Each Receipt this Period

1000.00

non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1480.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Willie Mims

Mailing Address 954 Newcastle Way

City

Pittsburg

State

CA

Zip Code

94565

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 04 / 2012

Transaction ID : SA11AI.4231

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

B. Joyce Newstat

Mailing Address 163 Beaumont Ave

City

San Francisco

State

CA

Zip Code

94118

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Consultant

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.4207

Amount of Each Receipt this Period

500.00

non-contribution account

Full Name (Last, First, Middle Initial)

C. John O'Toole

Mailing Address 1368 Trestle Glen Road

City

Oakland

State

CA

Zip Code

94610

FEC ID number of contributing federal political committee.

C

Name of Employer

Lawyer

Occupation

Nat. Center for Youth Law

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2012

Transaction ID : SA11AI.4501

Amount of Each Receipt this Period

240.00

non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ►

980.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 13 OF 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Masood Ordikhani

Mailing Address 91 Iris Ave.

City State Zip Code
 San Francisco CA 94118

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

City & County of San Francisco

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 06 / 2012

Transaction ID : SA11AI.4340

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

B. Rafael Perales

Mailing Address 2193 Mill Rd.

City State Zip Code
 Flint MI 48532

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Great Lakes Metal Works

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 24 / 2012

Transaction ID : SA11AI.4431

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

C. Gary Phillips

Mailing Address 1309 S. Sierra Bonita Ave.

City State Zip Code
 Los Angeles CA 90019

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

FreeLance

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 23 / 2012

Transaction ID : SA11AI.4309

Amount of Each Receipt this Period

240.00

non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

720.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Steve Phillips

Mailing Address 553 Arkansas St.

City State Zip Code
 San Francisco CA 94107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4835.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 29 / 2012

Transaction ID : SA11AI.4327

Amount of Each Receipt this Period

10.00

non-contribution account

Full Name (Last, First, Middle Initial)

B. Steve Phillips

Mailing Address 553 Arkansas St.

City State Zip Code
 San Francisco CA 94107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14835.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA11AI.4746

Amount of Each Receipt this Period

10000.00

non-contribution account

Full Name (Last, First, Middle Initial)

C. PowerPAC.org

Mailing Address 44 Montgomery St., Suite 2310

City State Zip Code
 San Francisco CA 94104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 22 / 2012

Transaction ID : SA11AI.4420

Amount of Each Receipt this Period

20000.00

non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30010.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. PowerPAC.org

Mailing Address 44 Montgomery St., Suite 2310

City State Zip Code
 San Francisco CA 94104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70598.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA11AI.4810

Amount of Each Receipt this Period

50598.30

In-kind - Staff, materials, contractors & others

Full Name (Last, First, Middle Initial)

B. Deborah Salkind

Mailing Address 245m Mt Hermon Rd. #332

City State Zip Code
 Scotts Valley CA 95066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : SA11AI.4740

Amount of Each Receipt this Period

2500.00

non-contribution account

Full Name (Last, First, Middle Initial)

C. Susan Sandler

Mailing Address 553 Arkansas St.

City State Zip Code
 San Francisco CA 94107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 22 / 2012

Transaction ID : SA11AI.4423

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

58098.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Michael Schmitz

Mailing Address 1629 Moreland Drive

City

Alameda

State

CA

Zip Code

94501

FEC ID number of contributing
federal political committee.

C

Name of Employer

ICLEI

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 19 / 2012

Transaction ID : SA11AI.4412

Amount of Each Receipt this Period

240.00

non-contribution account

Full Name (Last, First, Middle Initial)

B. Jane Segal

Mailing Address 315 Eureka St.

City

San Francisco

State

CA

Zip Code

94114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Natl Fdn Teaching Entrepreneur

Occupation

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2012

Transaction ID : SA11AI.4747

Amount of Each Receipt this Period

7000.00

non-contribution account

Full Name (Last, First, Middle Initial)

C. Carol H Tolan

Mailing Address 150 Columbus Ave., PH1A

City

New York

State

NY

Zip Code

10023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11AI.4321

Amount of Each Receipt this Period

10000.00

non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

17240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Carol H Tolan

Mailing Address 150 Columbus Ave., PH1A

City State Zip Code
New York NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11AI.4822

Amount of Each Receipt this Period

5000.00

contribution account

Full Name (Last, First, Middle Initial)

B. Sylvia Trujillo

Mailing Address 350 G Street SW #625

City State Zip Code
Washington DC 20024

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Medical Association

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 07 / 2012

Transaction ID : SA11AI.4527

Amount of Each Receipt this Period

100.00

non-contribution account

Full Name (Last, First, Middle Initial)

C. Michael Wald

Mailing Address 845 Ashbury St.

City State Zip Code
San Francisco CA 94117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stanford Law School

Occupation

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2012

Transaction ID : SA11AI.4466

Amount of Each Receipt this Period

240.00

non-contribution account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5340.00

117548.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Actblue California

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit card processing fees

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2012
Transaction ID : SB21B.4791

Amount of Each Disbursement this Period

14.42

Full Name (Last, First, Middle Initial)

B. Actblue California

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit card processing fees

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2012
Transaction ID : SB21B.4792

Amount of Each Disbursement this Period

28.05

Full Name (Last, First, Middle Initial)

C. Actblue California

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit card processing fees

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 23 / 2012
Transaction ID : SB21B.4793

Amount of Each Disbursement this Period

34.39

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.86

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Actblue California

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit card processing fees

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 27 2012
Transaction ID : SB21B.4795

Amount of Each Disbursement this Period

10.68

Full Name (Last, First, Middle Initial)

B. Actblue California

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit card processing fees

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 03 2012
Transaction ID : SB21B.4796

Amount of Each Disbursement this Period

17.00

Full Name (Last, First, Middle Initial)

C. Actblue California

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit card processing fees

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 14 2012
Transaction ID : SB21B.4797

Amount of Each Disbursement this Period

34.77

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62.45

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Actblue California

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit card processing fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 21 2012
Transaction ID : SB21B.4798

Amount of Each Disbursement this Period

27.67

Full Name (Last, First, Middle Initial)

B. Actblue California

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit card processing fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 23 2012
Transaction ID : SB21B.4799

Amount of Each Disbursement this Period

32.03

Full Name (Last, First, Middle Initial)

C. Actblue California

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit card processing fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 31 2012
Transaction ID : SB21B.4800

Amount of Each Disbursement this Period

264.87

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

324.57

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Actblue California

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit card processing fees

012

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 15 2012
Transaction ID : SB21B.4801

Amount of Each Disbursement this Period

50.80

Full Name (Last, First, Middle Initial)

B. Actblue California

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit card processing fees

001

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 15 2012
Transaction ID : SB21B.4802

Amount of Each Disbursement this Period

33.43

Full Name (Last, First, Middle Initial)

C. Actblue California

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit card processing fees

001

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 21 2012
Transaction ID : SB21B.4803

Amount of Each Disbursement this Period

23.15

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

107.38

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Fredrikson & Byron, P.A.

Mailing Address PO Box 1484

City Minneapolis State MN Zip Code 55480

Purpose of Disbursement
Legal Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 25 2012
Transaction ID : SB21B.4786

Amount of Each Disbursement this Period

691.50

Full Name (Last, First, Middle Initial)

B. Fredrikson & Byron, P.A.

Mailing Address PO Box 1484

City Minneapolis State MN Zip Code 55480

Purpose of Disbursement
Legal Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 25 2012
Transaction ID : SB21B.4788

Amount of Each Disbursement this Period

788.50

Full Name (Last, First, Middle Initial)

C. Integrated Digital Media

Mailing Address 441 California St.

City San Francisco State CA Zip Code 94104

Purpose of Disbursement
Materials for Antioch event

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 26 2012
Transaction ID : SB21B.4766

Amount of Each Disbursement this Period

507.04

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1987.04

**SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Integrated Digital Media

Mailing Address 441 California St.

City San Francisco State CA Zip Code 94104

Purpose of Disbursement
Materials for Antioch event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2012
Transaction ID : SB21B.4767

Amount of Each Disbursement this Period

169.26

Full Name (Last, First, Middle Initial)

B. Intuit

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2012
Transaction ID : SB21B.4753

Amount of Each Disbursement this Period

238.66

Full Name (Last, First, Middle Initial)

C. PowerPAC.org

Mailing Address 44 Montgomery St., Suite 2310

City San Francisco State CA Zip Code 94104

Purpose of Disbursement
In-kind - Staff, materials, contractors & others

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2012
Transaction ID : SB21B.4811

Amount of Each Disbursement this Period

50598.30

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51006.22

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 29

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Spoon & Company

Mailing Address 10307 Rawhide Trl

City Austin State TX Zip Code 78736

Purpose of Disbursement
Catering cost for Austin, TX event

003

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 26 2012
Transaction ID : SB21B.4751

Amount of Each Disbursement this Period

641.25

Full Name (Last, First, Middle Initial)

B. Spotlight Design & Printing

Mailing Address 725 Bryant St.

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Supplies

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 26 2012
Transaction ID : SB21B.4768

Amount of Each Disbursement this Period

592.50

Full Name (Last, First, Middle Initial)

C. Spotlight Design & Printing

Mailing Address 725 Bryant St.

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Delivery charge

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 26 2012
Transaction ID : SB21B.4770

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1248.75

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

PACPLUS

A. Texas Organizing Project

Mailing Address P.O. Box 120296

City	State	Zip Code
San Antonio	TX	78212

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4775

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name	
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
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10	10
11	11
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96	96
97	97
98	98
99	99
100	100

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

55813.27

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Hector Balderas

Mailing Address 500 Marquette NW #240

City
AlbuquerqueState
NMZip Code
87102

Purpose of Disbursement

011

Category/
Type

Candidate Name

Balderas for New Mexico

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: NM

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : SB23.4823

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Griego for Congress

Mailing Address P.O. Box 19352

City
AlbuquerqueState
NMZip Code
87119

Purpose of Disbursement

011

Category/
Type

Candidate Name

Griego for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: NM

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2012

Transaction ID : SB23.4829

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Marc Veasey Congressional Campaign

Mailing Address 6737 Brentwood Stair Rd, Ste 240

City
Fort WorthState
TXZip Code
76112

Purpose of Disbursement

011

Category/
Type

Candidate Name

Marc Veasey

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : SB23.4826

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6500.00

6500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PACPLUS

Full Name (Last, First, Middle Initial)

A. Jim Frazier for State Assembly 2012

Mailing Address 2401 Waterman Blvd. #4 PMB 104

City Fairfield	State CA	Zip Code 94533
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Purpose of Disbursement
CA State Assembly

011

Candidate Name

Jim FrazierCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2012

Transaction ID : SB29.4819

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Mary Ann Perez for State Representative

Mailing Address 7007 Gulf Freeway, Suite 125

City Houston	State TX	Zip Code 77087
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Purpose of Disbursement
Texas State Representative District 144

011

Candidate Name

Mary Ann PerezCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2012

Transaction ID : SB29.4815

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mary Gonzalez Campaign

Mailing Address P.O. Box 450

City Clint	State TX	Zip Code 79836
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Purpose of Disbursement
Texas State Representative District 75

011

Candidate Name

Mary GonzalezCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2012

Transaction ID : SB29.4813

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 29 OF 29
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PACPLUS	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00516500 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Chambers Lopez Strategies		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 5px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address P.O. Box 5539		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 28700.00 </div>
City Arlington	State VA	
Purpose of Expenditure Production cost and paid media ads		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <u>AZ</u> District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 28700.00 </div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.4186

Full Name (Last, First, Middle Initial) of Payee		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 5px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> _____ </div>
City	State	
Purpose of Expenditure		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">_____</div>
Name of Federal Candidate Supported or Opposed by Expenditure:		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> _____ </div>		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 28700.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 28700.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lisa Le

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y